

Members

Sen. Ronald Grooms, Chairperson  
Sen. Jean Breaux  
Rep. Wes Culver  
Rep. Sheila Klinker  
Sally Lowery  
Suda Hopkins  
Betty Williams  
Christopher Durcholz  
Susan Ferverda Hoback  
Bettye Dunham  
Scott Sefton  
Sharon Kooi



## COMMISSION ON DEVELOPMENTAL DISABILITIES

*Legislative Services Agency*  
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Indianapolis, Indiana 46204-2789  
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Ann Naughton, Attorney for the Commission

Authority: IC 2-5-27.2

### MEETING MINUTES<sup>1</sup>

**Meeting Date:** August 6, 2013  
**Meeting Time:** 10:00 A.M.  
**Meeting Place:** State House, 200 W. Washington St.,  
Room 233  
**Meeting City:** Indianapolis, Indiana  
**Meeting Number:** 1

**Members Present:** Sen. Ronald Grooms, Chairperson; Sen. Jean Breaux; Rep. Wes Culver; Rep. Sheila Klinker; Betty Williams; Christopher Durcholz; Bettye Dunham; Scott Sefton.

**Members Absent:** Sally Lowery; Suda Hopkins; Susan Ferverda Hoback; Sharon Kooi.

The first meeting of the Commission on Developmental Disabilities was called to order by Senator Grooms, Chairperson, at 10:15 A.M.. Senator Grooms announced that this was the first of three planned meetings for the Commission during the 2013 interim. He reviewed the legislative charges for the Commission and the Commission members that were present introduced themselves.

Cathy Robinson, Director of the First Steps program presented a brief description of the First Steps Program and an update on the demographic characteristics of the children served and average cost per child. See Exhibit A for the PowerPoint presentation.

Commission questions followed with regard to First Steps Program funding, family cost-sharing requirements, and the extent to which services are suspended for nonpayment of copayments. Additional questions dealt with the impact on the First Steps Program of federal sequestration and the Patient Protection and Affordable Care Act. Senator Grooms requested that Ms. Robinson supply the Commission members with a summary of the operating funding for the program. He also requested data on the percentage of Hoosier children ages 0 to 3 years that are served by the First Steps Program and a comparison to similar statistics for other states.

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<sup>1</sup> These minutes, exhibits, and other materials referenced in the minutes can be viewed electronically at <http://www.in.gov/legislative>. Hard copies can be obtained in the Legislative Information Center in Room 230 of the State House in Indianapolis, Indiana. Requests for hard copies may be mailed to the Legislative Information Center, Legislative Services Agency, West Washington Street, Indianapolis, IN 46204-2789. A fee of \$0.15 per page and mailing costs will be charged for hard copies.

Melody Cooper, President of Self Advocates of Indiana reviewed the activities of the group during the last year. See Exhibit B for the Fall 2013 Report and Exhibit C for the newsletter. Ms. Cooper reported there are now 43 chapters of Self-Advocates statewide and invited Commission members to attend the Self-Advocates Conference to be held October 8-9, 2013, at the Marten House in Indianapolis. Commission questions and discussion followed. When asked what the state could do to assist, Ms. Cooper responded that access to jobs and transportation is a pressing need and that more funding for training facilities and job placement assistance would be welcomed.

Tim Brown, Director, Legislative Services, Department of Correction (DOC), presented an overview of the DOC, identification of developmentally disabled offenders, services that are available for them during incarceration, and reentry services. See Exhibit D for the PowerPoint presentation. Cara Misetic, Ph.D., Regional Behavioral Health Director, explained that offenders experiencing difficulty adjusting to the environment typically are referred to mental health services where they are evaluated and plans for treatment are developed. Dr. Misetic discussed special needs housing arrangements noting that adults with autism or intellectual disabilities are housed with the general population. Temporary special needs treatment may be met in three mental health units that are not considered to be long-term or permanent housing.

Commission questions followed dealing with offenders' medical records following them into and out of the DOC, offenders' Medicaid eligibility, and re-entry treatment of special needs offenders. Dr. Misetic explained that the re-entry process starts 180 days before release and discussed the transition process and problems with it. Senator Grooms asked about inmates being released without medications. Dr. Misetic clarified that the DOC releases offenders with 30 days worth of medications.

John Dickerson, Executive Director, ARC of Indiana, commented that the DOC recognizes that individuals with developmental disabilities are in the facilities and that a memorandum of Understanding (MOU) is under discussion with the Division of Disability and Rehabilitative Services. He expressed the wish that the MOU could ultimately result in the ability to suspend an offender's Medicaid eligibility rather than the current practice of terminating eligibility. He noted that individuals with developmental disabilities are good at masking intellectual disabilities and that mental health services may not be the best treatment modality. Mr. Dickerson noted that the subject of offenders being released without medications is more of an issue with county jails than with the DOC. Anecdotal evidence indicates that medications cannot be supplied from the outside for jail inmates and they may be released in an unstable condition. The extent to which this is a problem is unknown since there are 92 county jails. Commission questions followed.

Nicole Norvelle, Director, Division of Disability and Rehabilitative Services presented information on the organization of the Division, the services administered, and performance metrics. See Exhibit D for the PowerPoint presentation. Commission questions followed regarding wait lists for Medicaid waiver services, services available on the waivers, and how waiver budgets work. The Commission members asked Ms. Norvelle to return to the next Commission meeting to discuss provider reimbursement and the rate structure for waiver services.

Senator Grooms asked for Commission members' suggestions on topics they wished to be addressed during the 2013 interim. Discussion followed. The meeting adjourned at 12:20 P.M.

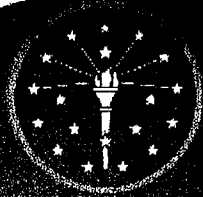


# The Indiana Family and Social Services Administration

## Indiana Commission on Developmental Disabilities

Cathy Robinson  
Director  
First Steps Program

August 6, 2013





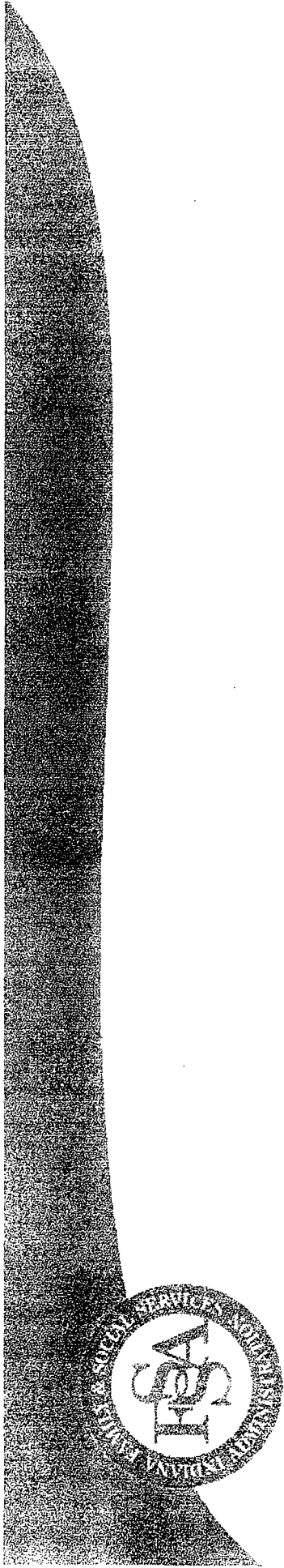
## FIRST STEPS

- Indiana's First Steps System is a family-centered, locally-based, coordinated system that provides early intervention services to infants and young children with disabilities or who are developmentally vulnerable.
- First Steps brings together families and professionals from education, health and social service agencies. By coordinating locally available services, First Steps is working to give Indiana's children and their families the widest possible array of early intervention resources.
- Families who are eligible to participate in Indiana's First Steps System include children ages birth to three years, who are experiencing developmental delays and/or have a diagnosed condition that has a high probability of resulting in developmental delay.



## FIRST STEPS SERVICES

Reporting Period	4/1/10-3/31/11	4/1/11-3/31/12	4/1/12-3/31/13
Average age at referral	14 months	14 months	<b>14 months</b>
Annual count of children with an IFSP	20,977	20,222	<b>20,001</b>
One Day Count of children 0-3	9,111	9,171	<b>9,082</b>
One Day Count of children 0-1	1,206	1,310	<b>1,329</b>
Children moving to Preschool Special Ed	33%	34%	<b>37%</b>
Average cost per child	\$1,942.42	\$1,575.88	<b>\$1,573.06</b>



# Questions?



# Self-Advocates of Indiana

2013 Fall Report to the DD Commission, August 6, 2013

## Self-Advocacy Efforts: Around the State

To Support Self-Advocacy Efforts in 2013, Self-Advocates of Indiana has:

- Wrapped up My Life, My Choice, an effort to interview 1,100+ residents of nursing facilities to discuss community living options;
- Employed 17 self-advocates as Lead Interviewers for My Life, My Choice;
- Expanded chapter membership to more than 40 across the state;
- Presented to dozens of groups on "Self-Advocacy Basics;"
- Representation from 25 self-advocates who serve on the Indiana Board of Directors;
- Hosted the annual Self-Advocates Picnic for more than 600 people;
- Communicated with chapters through quarterly newsletters and quarterly meetings;
- Increased social networking through regular Facebook and Twitter updates;
- Written, published, and produced quarterly newsletters, *Nims' News*;
- Interviewed, approved, and hired a new Administrator, effective August 1, 2013

## Legislative and Advocacy Efforts: Across the Country

SAI has been involved in nationwide efforts, including:

- Valentine's Day at the Indiana State House to share cards from self-advocates;
- Attendance at April's Disability Policy Seminar in Washington, DC;
- Lobbying in Washington, DC to visit Indiana's Congressional Representatives;



## Employment Initiatives

SAI continues to push employment for people with disabilities. Efforts included:

- Presenting "Hire ME! Why It's Worth It" at statewide and national APSE (Association of People for Supported Employment) conference;
- Collaborating on the creation of *Pathways to Employment*, a series of seven short films highlighting employed self-advocates and the "pathways to employment"
- Creating and publishing "A Guide to Community Employment and Vocational Rehabilitation," a guide to navigate the job-seeking system

**Exhibit B**  
**Commission on Devel. Disabilities**  
**Meeting #1, 8/6/2013**

## Health and Wellness

Staying healthy is key! SAI is promoting healthy lifestyles through:

- Health and Wellness activities at the SAI Picnic. This included Zumba dancing, discounted gym membership, and free health screenings by IU Med Students and pharmacists to discuss basic health, prescriptions, and more.
- Healthy giveaways were also shared, including tote bags with a healthy message, sunglasses, toothpaste, and portion plates.
- Health and wellness, including healthy eating, sexuality and relationships, and exercise will be part of the SAI Conference on October 8-9.



## Community Partners

Staying active in the community is important. We are proud to partner with the following organizations and groups:

- The Blueprint Steering Group (regular meetings); Managed Care Sub-Committee
- DDRS Stakeholders (monthly meeting)
- DDRS Advisory Council (monthly meeting)
- FSSA SGL Conversion Taskforce (bi-weekly meeting)
- Indiana Protection and Advocacy Services (activities about rights, anti-bullying)
- IIDC Advisory Group (quarterly meetings)

We have also collaborated on projects and community discussions with groups such as:

- |   |                                 |
|---|---------------------------------|
| • Kiwanis International/Aktion Clubs                          | • Indiana United Cerebral Palsy |
| • INAPSE  | • Special Olympics              |
| • INARF   | • Best Buddies                  |
| • DSPIN   | • Down Syndrome Indiana         |
| • Governor's Planning Council for<br>People with Disabilities | • Autism Now                    |
|   | • ...and more!                  |

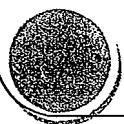
Self-Advocates of Indiana\*107 N. Pennsylvania Street, Suite 800\*Indianapolis, IN\*46204  
Keep in touch! Follow us on Facebook and Twitter!



[www.facebook.com/saIndiana](http://www.facebook.com/saIndiana)



@SelfAdvocatesIN







# Nims' News

Volume 2, Issue 2

June 2013

## Advocacy in Action: My Trip to DC

By Ashley Porter-Szabo (Johnny Appleseed Aktion Club; SAI Board)

I'm here in Washington, DC for a conference in which we meet our Senators and Congressmen and women to address our issues that are important. We speak up for ourselves because it's important that our voices are heard. To our Congressmen and women we talked about some of the bills that affect us, like Social Security and Medicaid.

I'm having fun in Washington, DC, and meeting new self-advocates from all over the world and all over the US. It's important for us as self-advocates to speak up and be heard on the issues that are important to us. On Wednesday we get a chance to meet our Congressmen and women so we can address our issues that are important to us for people that have a disability and our voices can be heard. That's the most important to us.

We also learned how bills are passed into laws and some laws can affect us or people with a disability. The conference was fun and people with a disability are the same as everybody else without a disability. We do the same things as everybody else but we do things differently and maybe at a different pace. I am really glad I went to the conference. To get there, I was awarded a grant by the city of Fort Wayne for the work I am doing for people with disabilities in my community. It was worth it, so you should consider it next year!



Self-Advocates, from left, Ned Russell-Sullivan, Kurt Bassett, and Ashley Porter-Szabo met with Indiana Representative, Marlin Stutzman.

**Exhibit C**  
**Commission on Devel. Disabilities**  
**Meeting #1, 8/6/2013**

Do you want to go?  
**The Disability Policy Seminar is held each year in Washington, DC. The date for next year's conference is April 6-9, 2014.**

### Inside this issue:

**"Keep talking to others about our rights and what we believe in...not just for us now, but for the generation that is coming on in a few years."**

- M. Cooper

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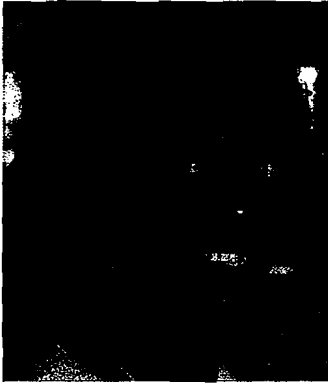
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## From the President's Pen



I just can't believe it is summer. Where did this year go? But SAI is doing a lot and has been off to a good start. We have seen some new chapters start, and have been around the state.

We have been talking to our legislators, and it has been good so far. Recently, we meet with the office of Senator Coats and talked to them about the UN Convention on the Rights of Persons with Disabilities. This treaty is for people with disabilities all over the world and ensuring they have rights.

There is a lot coming up this summer, too. We have lots more to do to get ready for our Annual Picnic on July 19. It is going to be a fun day, so make sure to join us! We are also getting ready for our conference on October 8-9. We are doing a presentation at the APSE Conference in June to talk about employing people with disabilities.

So what does all of this mean for self-advocacy? All of this means that Self-Advocates of Indiana is working to have our voices be heard. And YOU, as a chapter or supporter of SAI, are part of this, too, as you continue to work in your local groups. We do have a voice. Going to all of these meetings, it feels like we are being heard more **now** than we did five or ten years ago. But, I feel like there are a lot more people who haven't heard from self-advocates yet, and they need to know, that sure, we have a disability, but we also need to be heard and not spoken down to. Because we are human!

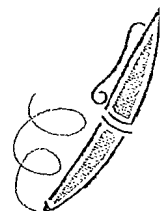
What can we as SAI do about it? What can you as an individual do about it? Keep talking to others about our rights and what we believe in...not just for us now, but for the generation that is coming on in a few years. To let the kids of today know that they have voices, and let them know that when they grow up, they know that their voices are important, too, and need to be heard. So talk to your legislators, the people in the State House, your teachers, your parents, your friends, people you meet in the community and may want to know more.

It is important for everybody to hear that we have a voice because they need to know that we are just as important as anybody else. For so long, nobody paid attention. For so long, nobody understood. For me, nobody understood me when I was growing up. Nobody listened. Even as a child, somebody needs to listen and not always say "that child doesn't know." Because you'll be surprised by what that child does know! Today, now that I'm grown up, married, and responsible, I know there are people who listen. But there needs to be somebody doing the talking so that we can be heard!

Sincerely,

Melody Cooper

President, SAI

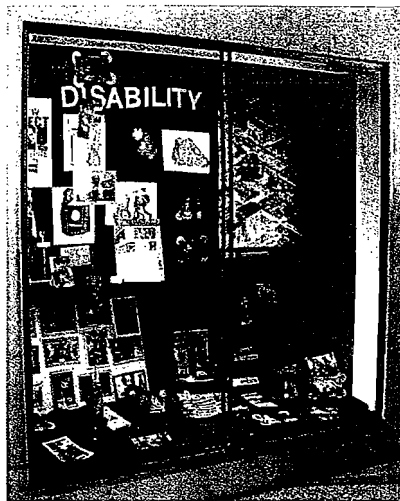




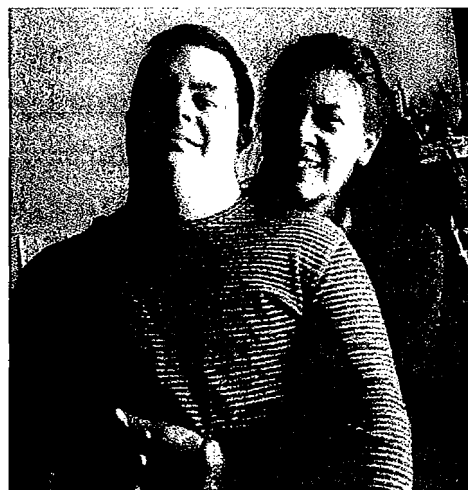
## Disability Awareness Month: Spotlight on Decatur County Self-Advocacy Group

Self-Advocate chapters across Indiana were busy in March, celebrating Disability Awareness Month. Decatur County Self-Advocacy Group was no exception, as they made a public splash in their community! Read more about what they did to raise awareness.

- The self-advocates put together a display at the Greensburg/Decatur Co. library showing their "community connections" (pictured to the right). Some of the self-advocates took pictures. They also did drawings and paintings to show how they are connected with their community. This display was featured on the front page of the Greensburg Daily News one morning!
- Jenny Maddux and Shelly Weber were guests on the local radio station on Monday to promote Disabilities Awareness Month. They spoke a half-hour on WTRE 1330AM about what our self-advocates do in the local community.
- The Greensburg Daily News came to interview all self-advocates in Greensburg that are employed in the community to do a cover story on their jobs/employers. They talked about how they are connected to their community because they have employment in the community.



Around  
Indiana



# The Healthy Way

Great tips for a happy, healthy YOU!

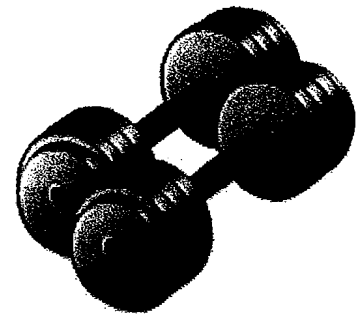
## Tip #2: Exercise is important to your health...and it can be fun!

Exercise helps strengthen our muscles and heart.  
Exercise helps keep our lungs healthy and makes us breath better.

Exercise improves how we feel emotionally.  
Exercise gives us more energy.

### Here are some tips to help you get started!

- Get an "OK" from your doctor before you start an exercise program.
- Make a plan to exercise regularly. Strong lungs and a strong heart means getting your heart rate up for at least 20 minutes 3 times a week!
- Try to exercise at the same time each day or week so you get into a routine and your body gets used to it.
- Join a health club. Your local YMCA offers discounted rates for all income levels. Get advice from the staff and trainers!
- Warm up slowly before exercising and warm down after exercising.
- Pick something you like to do—it can be fun!
- Find an "Exercise Buddy" to exercise together and help stay on track.
- EXERCISE can be a lot of things



Walking your dog.

Riding a bike.

Stretching.

Playing basketball.

Doing yoga.

Lifting weights.

Taking the stairs.

Jogging.

...and more!

**This summer, commit to being a happy, healthy YOU!**

Watch for more great tips in each *Nims' News*!

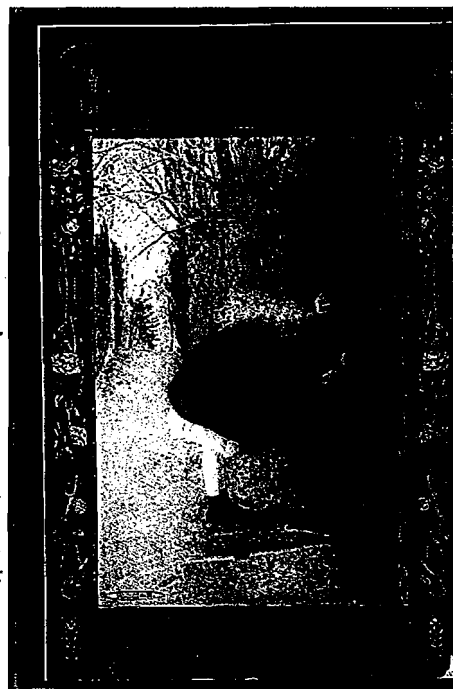
Do you have a Health Tip to share or a question to ask?  
Contact Betty Williams at (317) 977-2375 or [bwilliams@arcind.org](mailto:bwilliams@arcind.org).

## Summer Reading! A Book Review:

### "The Secret Garden"

By Leann Dusenbery

"The Secret Garden" is story written by Frances Hodgson Burnett. It takes place in 1911, starting in India with Mary Lennox. She returns to England when her family dies, and she goes to live with her uncle in a big house in the country. Her uncle at the Manor tells Mary not to go in the locked doors. Mary meets the gardener, Dickon, who is Martha's brother. He begins to help Mary find the lost key to the Secret Garden. Mary wants to clean up the garden. Dickon helps her. One night Mary hears crying. She goes to see who it is and finds Colin, a ten year-old boy who is her cousin. He is sick all of the time and thinks he won't live much longer.



Mary and Dickon help Colin get to the garden and do exercises with him. At the end of the story, Colin is able to stand up and walk. I like this book. It is also a movie. We treat people with disabilities or illness better now than they did in this book.

## SA Chapters: Welcome, New Groups!

SAI is happy to welcome TWO new groups this quarter.

### They are:

- Happiness Bag Achievers (Terre Haute, Region 4)
- The Go Getters, Hillcroft (New Castle, Region 6)

**Congratulations and welcome to  
Self-Advocates of Indiana!**

If you know of a group or individual who may be interested in learning about SAI, let us know!



**SAI's NEWEST COLUMN!**

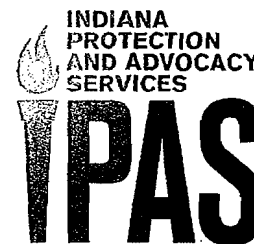
This quarter, SAI is pleased to welcome our newest column, sponsored by Indiana Protection and Advocacy Services (IPAS). It will be about RIGHTS and ADVOCACY!

*Do you have a question about rights? Is there a topic we can focus on?*

*Let's hear from YOU!*

## **Assistive Technology**

*By Karen Pedevilla, Education and Training Director, IPAS*



For individuals with disabilities, assistive technology (AT) can improve access to education, employment, independent living, recreation and participation in the community.

Assistive technology (AT) **device** is defined as any item or piece of equipment that is used to increase, maintain or improve functional capabilities of individuals with disabilities. Some examples are durable medical equipment such as lifts, wheelchairs, speech communication devices, devices for hearing and vision, aids for daily living or recreation, etc. Assistive technology **service** means any service that assists an individual with a disability in the selection, acquisition or use of an assistive technology device.

IPAS may be able to assist individuals with disabilities and their family members, guardian, advocates, and authorized representatives in accessing technology devices and assistive technology services. The goal is to obtain both the AT that individuals need, such as a power wheelchair or communication device, and any related AT service, such as a medical evaluation, prescription and training in the use of the device.

### **IPAS may provide assistance through:**

- |  |                         |
|--|-------------------------|
| 1. Information and referral  | 2. Technical assistance |
| 3. Training, education and outreach  | 4. Advocacy             |
| 5. Representation by an IPAS Advocate, and in some cases an attorney, to correct rights violations |                         |

**Individuals with disabilities must have equal access to programs, services, and technology.**

For more information regarding assistive technology and IPAS services, contact Indiana Protection and Advocacy Services Commission

800.622.4845

317-722-5555

800-838-1131 (TTY)

[www.in.gov/ipas](http://www.in.gov/ipas)

# Care for the Wheelchair

Contributions by Leann Dusenbery

At the SAI meeting on May 8, Matt Miller from Best Care Home Medical Equipment did a presentation on wheelchair technology. He showed pictures of different chairs and accessories. He also talked about current federal legislation that will make medical equipment – like wheelchairs – easier for people to afford. One of these bills, HR 942, “Ensuring Access to Quality Rehabilitation Technology,” will help people get equipment that promotes independence.

The other bill, HR 1717, will help bring

down the cost of these items. Both bills need support from Indiana’s legislators.

Whether you use a wheelchair or not, you can write or call your legislator to tell them why this is important. Advocacy means standing up for yourself and others! If you have questions, contact Matt Miller at Best Care Home Medical Equipment by calling ( 8 1 2 ) 3 2 0 - 0 3 2 0 or [matt@bestcarehme.com](mailto:matt@bestcarehme.com).

## Check this out!

Do you recognize this symbol? You have probably seen it on parking spaces, restrooms, and other public spaces. New York City recently voted to use a new version of this symbol, showing a more active individual. What do you think of the new symbol? Do you like it? Should NYC have stuck with the old one?

**Share your opinion on SAI’s Facebook Page**  
([www.facebook.com/saindiana](http://www.facebook.com/saindiana)) or by contacting Melody.





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**Keep in touch!**

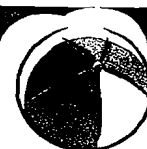


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## 2013 SAI Picnic



**Friday July 19, 2013**

**10AM-3PM**

**Join SAI for the annual statewide picnic!**  
**Celebrate another great year of self-advocacy with**  
**food, games, music, and more!**

Eagle Crest Picnic Area (Located in Eagle Creek Park)  
7201 Fishback Road, Indianapolis, IN 46278

**You (and your group) can sign up today:**  
**[http://www.arcind.org/index/News-and-Events/](http://www.arcind.org/index/News-and-Events/SAI-2013-Annual-Picnic.asp)**  
**[SAI-2013-Annual-Picnic.asp](http://www.arcind.org/index/News-and-Events/SAI-2013-Annual-Picnic.asp)**

**Or contact Melody to request a paper registration form!**

**Registration**  
**is due July 10!**

**SAI MEMBERS**

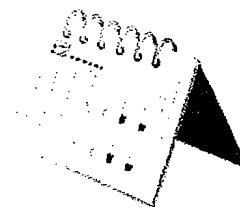
**\$15**

**Save the Date**  
**SAI Conference**  
**October 8-9**  
**The Marten House (Indy)**



### 2013 Meetings and Events

- June 13—SAI Board Meeting
- July 19—SAI Annual Picnic (Eagle Crest Park)
- Sept. 19—SAI Board Meeting
- October 8-9 — SAI Conference and Elections
- Dec. 9-10—SAI Board Meeting





# OVERVIEW OF DEVELOPMENTAL DISABILITIES IN THE DEPARTMENT OF CORRECTION



Exhibit D  
Commission on Devel. Disabilities  
Meeting #1, 8/6/2013

# Correctional Aim

## ● Mission

- The Indiana Department of Correction advances public safety and successful re-entry through dynamic supervision, programming, and partnerships.

## ● Vision

- The Indiana Department of Correction uses best correctional practices to protect the people of Indiana and ensure the consequence for criminal behavior is meaningful.”

# Terminology

- Jails vs. Prison

- Jail typically year or less, usually minor offenses in custody in local community administered by the county- no oversight by DOC

- Prison/Correctional facilities- felony convictions at least a year, more serious offenses usually located in rural areas away from metropolitan areas- oversight is administered by DOC

# Terminology-cont'd

- Probation - administered by Courts
  - Person can be supervised by probation after release from jail or prison.
  - No oversight by DOC
- Parole-administered by DOC Parole division upon release
  - Oversight by DOC

# DOC Statistics

Reentry starts with Day 1

98% of the adult population will be released into 1 of 92 counties

Adult population -27934

Approximate yearly intake -14000

Approximate yearly release -18000

Juvenile population – 491

Recidivism rate – 36.1%

# Developmental Disability Population within DOC

- Defined by IC 12-7-2-61 (22 and under)
- Medical Component

Total with a Autism Spectrum Disorder  
Diagnosis

Total- 19

- 5 juveniles
- 14 adults

- Total with an Intellectual Disability

Total-156

- 6 juveniles
- 150 adults

# Identification

- At intake, 100% of all offenders are seen by mental health staff for evaluation

- Educational records are forwarded from the last school of record during the intake process.

- Inmates are able to request to be seen by medical

- Staff can refer inmates to be seen by medical

- New Staff receive MMRD training during the Pre-service Academy and Veteran Staff receive a Computer Based Training during Annual In-service Training on MMRD population and identification.

# Developmental Disability Population within DOC

## ● Education

### Juveniles

Treats those juveniles who have:

Emotional Disability

Learning Disability

Cognitive Disability

Other Health Impaired

Multiple Disability

Autism Spectrum Disorder

Low Vision

Hard of Hearing



# Programs

- ④ Educational
  - Evaluate educational record
  - Hold a case conference meeting
  - Develop an educational treatment plan
- ④ Special Accommodations
  - American Disability Act (Sec. 504)
    - A person can request certain accommodations for learning purposes.

# Medical Treatment

Offenders who are having problems adjusting to or functioning in the correctional environment are typically referred to MH staff

All offenders are seen within 7 days of either staff referral or offender request for services

Individualized treatment plans are designed to help address individuals needs

# Treatment is patient and need specific

- Many individuals function without problems or distress in correctional setting

- For most in the system, the developmental or intellectual disability is not the primary focus of treatment – individuals typically have co-morbid diagnoses

# Need specific Focus

- Focus of treatment typically includes:
  - Coping with emotions
  - Managing anger
  - Controlling impulsive behavior
  - Improving Social interactions

# Types of Mental Health Treatment

## ❶ Psychotropic Medications

- Most typically prescribed for co-morbid conditions such as an anxiety, mood, or psychotic disorder

## ❷ Individual Therapy and/or Individual MH Monitoring

## ❸ Group Therapy

# Placement/Housing within IDOC

- Individuals with autism spectrum diagnoses are typically managed by MH departments in general population settings.

For juveniles, there does not appear to be a similar pattern. However, programmatically students with significant known social, emotional or cognitive impairments have been housed at PNJCF on the Special Needs Unit.

# Placement/Housing within IDOC

- For adults requiring specialized mental health units, there was typically a significantly complicating co-morbid condition such as Borderline Intellectual Functioning, Schizophrenia, Mild Mental Retardation, or a combination.

# Reentry into the Community

- Barriers to Reentry for all inmates
  - Employment, Housing and Transportation
- Currently Casework Managers work with inmates to determine best transitional process.
- This could include contacting family members, health providers or assisting in finding housing and employment



# Partnerships for Reentry

- 1. DDORS and DOC will establish an MOU geared at early identification of the DD population at intake.
- 2. DDORS will complete eligibility determination to determine if the inmate is eligible for DDORS services upon release.
- 3. DOC and DDORS will collaborate on transition planning to ensure appropriate supports are in place upon release.



# The Indiana Family and Social Services Administration

## Indiana Commission on Developmental Disabilities

Nicole Norvell

Director

Division of Disability and Rehabilitative Services

August 6, 2013



Exhibit E  
Commission on Devel. Disabilities  
Meeting #1, 8/6/2013



# **FSSA's Division of Disabilities and Rehabilitative Services(DDRS)**

## **First Steps**

- Assistive Technology
- Developmental Therapy
- OT/PT Services

## **Bureau of Developmental Disabilities (BDDS)**

- Medicaid Waiver Services
- Supervised Group Living

## **Bureau of Rehabilitative Services (BRS)**

- Vocational Rehabilitation Services (VRS)
- Blind Entrepreneurs Program
- Deaf/Hard of Hearing Services

## **Provider Relations**

- Approval of Medicaid Providers
- Point of contact for Consumers/Families and Provider Community

## **Bureau of Quality Improvement Services (BQIS)**

- Monitors services to individuals by organizations and providers



# **Bureau of Developmental Disabilities**

- Bureau of Developmental Disabilities Services (BDDS) provides services for individuals with developmental disabilities that enable them to live as independently as possible in their communities. BDDS assists individuals in receiving community supports and residential services.
- Home and Community Based Medicaid Waivers
  - Community Integration and Habilitation Waiver (CIH)
  - Family Supports Waiver (FSW)



## **Family Supports Waiver (FSW)**

- The amount of funding for individuals receiving the FSW \$16,250 annually.
- Services available on the FSW include but are not limited to:
  - Physical/Occupational Therapy
  - Behavioral Supports
  - Community Based Habilitation- Individual and Group
  - Family and Caregiver Training
  - Case Management



# **Community Integration and Habilitation Waiver (CIH)**

- The CIH Waiver is a needs-based waiver, which means that an individual must meet one of the following emergency priority criteria to access this waiver.
  - Loss of primary caregiver
  - Caregivers over the age of 80
  - Evidence of abuse or neglect in current institutional or home placement
  - Extraordinary health & safety risk



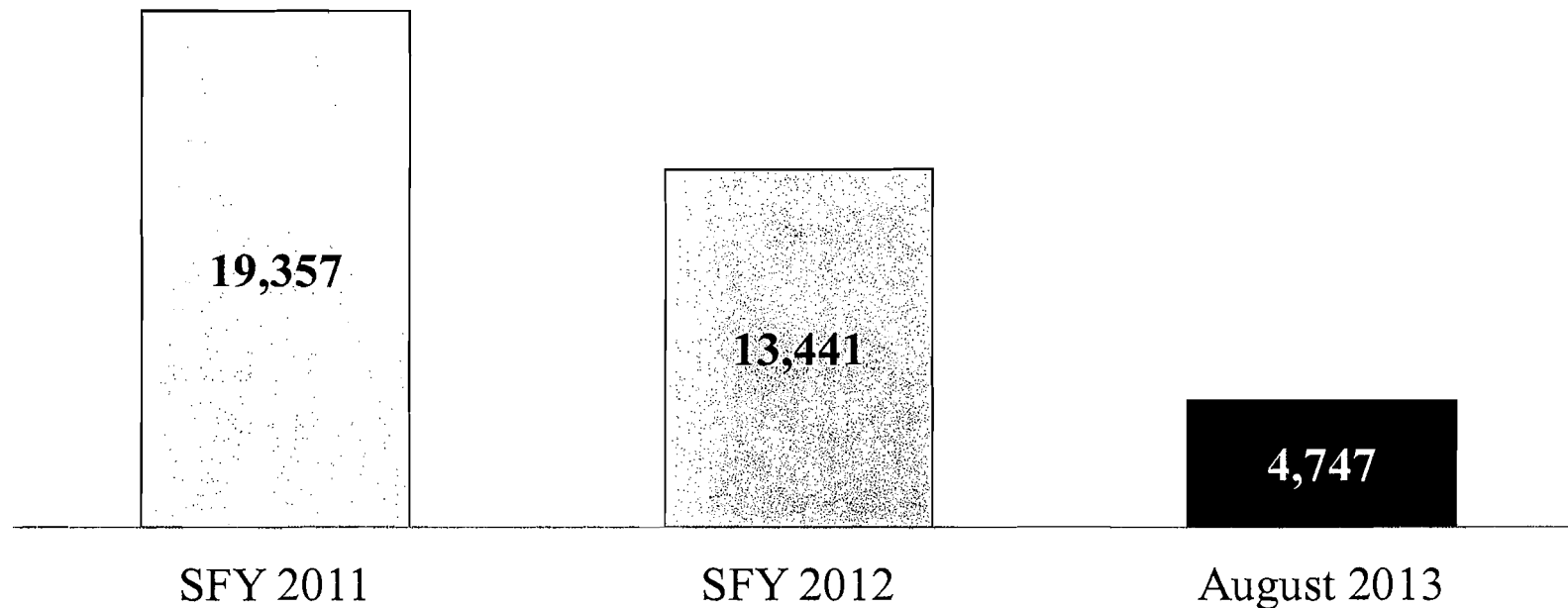
# Waiver Numbers

Waiver Type	Individuals
Family Supports Waiver (FSW)	6,698
Community Integration and Habilitation Waiver (CIH)	8,220
Total	14,918



# Waiver Waitlists

- Number of individuals on the Waiver waiting list
- Number of individuals on the FSW waiting list







## **Supervised Group Living (SGL) and State Line Services**

- Currently, there are 522 Intermediate Care Facilities for persons with Intellectual Disabilities (ICF/ID, aka Supervised Group Living (SGLs) in Indiana that serve 3,740 consumers.



# Vocational Rehabilitation Services (VRS)

- Provides quality individualized services to enhance and support people with disabilities to prepare for, obtain or retain employment.
  - A consumer is eligible for VR Services if a determination is made that:
    - ✓ he or she has a *physical or mental impairment*;
    - ✓ the physical or mental *impairment constitutes or results in a substantial impediment to employment*; and
    - ✓ the individual *requires vocational rehabilitation services to prepare for, enter, engage in, or retain an employment outcome* consistent with his or her abilities, capacities, career interests, and informed choice.



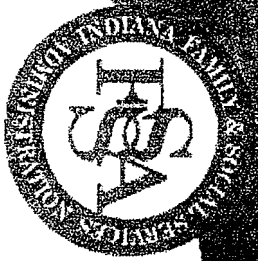
## Blind and Visually Impaired Services

- Randolph-Sheppard Business Enterprise Program provides entrepreneurial opportunities for legally blind clients of Vocational Rehabilitation Services. *\$52,000 average income/yr.*
- Older Blind/Visually Impaired Program expands independent living services for people who are age 55 and older, and have a severe visual impairment.



## **Deaf & Hard of Hearing Services (DHHS)**

- Deaf & Hard of Hearing Services (DHHS) provides assistance to identify and find resources to meet the needs of deaf and hard of hearing individuals and their families, throughout the State of Indiana. Services offered through DHHS include:
  - Advocacy
  - Community Education
  - Technical Assistance
  - Interpreting Services
  - Case Management



**Questions?**